

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

2nd principal dwelling parcel.
APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)
AUG 14 2014

ENTERED

Permit #:	14-0285
Date:	8-21-14
Amount Paid:	\$125 8-14-14
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Hand the Title

TYPE OF PERMIT REQUESTED →		<input type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name: <u>Lisa Gordon</u>		Mailing Address: <u>PO Box 842 Bayfield W.</u>		City/State/Zip: <u>54814</u>		Telephone: <u>715-778-0123</u>									
Address of Property: <u>37200 Gordon Road</u>		City/State/Zip: <u>Bayfield Wis 54814</u>				Cell Phone:									
Contractor:		Contractor Phone:		Plumber:		Plumber Phone:									
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone:		Agent Mailing Address (include City/State/Zip):		Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No									
PROJECT LOCATION <u>SW 1/4, SW 1/4</u>		Legal Description: (Use Tax Statement)		PIN: (23 digits) 04-		Recorded Document: (i.e. Property Ownership) Volume _____ Page(s) _____									
Section <u>31</u> , Township <u>51</u> N, Range <u>03</u> W		Town of: <u>Russell</u>		Lot Size		Acreage <u>2.08</u>									

<input checked="" type="checkbox"/> Non-Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain?	If Yes---continue →	Distance Structure is from Shoreline: _____ feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage	If Yes---continue →	Distance Structure is from Shoreline: _____ feet		

Value at time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$ <u>10,000</u>	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> Municipal/City	<input checked="" type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
	<input checked="" type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
	<input type="checkbox"/> More mobile	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____

Existing Structure: (if permit being applied for is relevant to it)	Length: <u>62</u>	Width: <u>14</u>	Height: <u>15'</u>
Proposed Construction:			

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property) <u>2nd on property</u>	(<u>14</u> x <u>62</u>)	<u>862 sq'</u>
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	(<u> </u> x <u> </u>)	
	<input type="checkbox"/> with Loft	(<u> </u> x <u> </u>)	
	<input type="checkbox"/> with a Porch	(<u> </u> x <u> </u>)	
	<input type="checkbox"/> with (2 nd) Deck	(<u>12</u> x <u>12</u>)	<u>144</u>
	<input type="checkbox"/> with (2 nd) Deck	(<u>12</u> x <u>12</u>)	<u>144</u>
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(<u> </u> x <u> </u>)	
	<input checked="" type="checkbox"/> Mobile Home (manufactured date) _____	(<u>14</u> x <u>62</u>)	<u>862 sq'</u>
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify) _____	(<u> </u> x <u> </u>)	
	<input type="checkbox"/> Accessory Building (specify) _____	(<u> </u> x <u> </u>)	
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	(<u> </u> x <u> </u>)	
Rec'd for Issuance	<input type="checkbox"/> Special Use: (explain) _____	(<u> </u> x <u> </u>)	
	<input type="checkbox"/> Conditional Use: (explain) _____	(<u> </u> x <u> </u>)	
<u>AUG 21 2014</u>	<input type="checkbox"/> Other: (explain) _____	(<u> </u> x <u> </u>)	

Secrecial Staff
FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
am late responsible for the detail and accuracy of all information. I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at a reasonable time for the purpose of inspection.

Owner(s): Lisa Gordon
(if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: _____ Date 8-14-14

(if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit _____

Attach

Copy of Tax Statement
if you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Look below: Draw or Sketch Your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*): (*) Wetlands; or (*) Slopes over 20%

Please complete (1) - (7) above (prior to continuing)
(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	5' 14' ^{17'}	Setback from the Lake (ordinary high-water mark)	N/A
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	4'-220' 170' Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	4'-45' 33' Feet	Setback from Wetland	Feet
Setback from the West Lot Line	4'-130' Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	4'-100' Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	N/A	Setback to Well	N/A
Setback to Drain Field	Feet		Feet
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

RECORDED Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 14-03885		Permit Date: 8-21-14		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Attached
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		Affidavit Required
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Affidavit Attached
Was Parcel Legally Created		Were Property Lines Represented by Owner		Affidavit Required
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Affidavit Attached
Was Proposed Building Site Delineated		Was Property Surveyed		Affidavit Required
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Affidavit Attached
Inspection Record: own present to represent property line. Apparent property can be divided into 2 compounds. R-12B parcels & local zoning district (R-12B) dwelling meet all applicable setback requirements. Setback requirements (N/A)		Date of Re-Inspection:		
Date of Inspection: 8-14-14		Inspected by: J. C. C. - Municipal		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be attached.)				
2nd dwelling on property shall be placed at least 40' from easement road to south. property owner shall provide necessary construction to the structure through Red Cliff water & sewer.				
Signature of Inspector:				Date of Approval:
Hold For Sanitary: <input type="checkbox"/>				Hold For TBA: <input type="checkbox"/>
Hold For Affidavit: <input type="checkbox"/>				Hold For Fees: <input type="checkbox"/>

2.08 acres; R-12B = 30,000 Sq. ft. lot requirement w/ 15' frontage. Buildings at least 20' apart - proposed to be 50'.

Gordon's Property



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(2) 12x12
Decks

for 11gven/egre proposed

52' Between deck on
back of existing double wide -
parcel lines on this overview are
Field inspection indicates
proposed const. is 45' to south line
& existing double wide is 20' to east line.

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
Date Stamp (received)
JUL 11 2014
Bayfield Co. Zoning Dept.



Permit #:	14-00887
Date:	8-22-14
Amount Paid:	\$185 7-19-14
Refund:	\$185 7-17-14

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: Dan/Laura Stoicova	Mailing Address: W1114 Rock-creek Rd Spencer, WI 54479	City/State/Zip: 54479	Telephone: 715-657-5121
Address of Property: Hwy 13 Bayfield/Conover Rd.		City/State/Zip: Bayfield, WI.	Cell Phone: 715-507-0254
Contractor: owner		Contractor Phone:	Plumber: Stoicova Plumbing 715-507-0254
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone:	Agent Mailing Address (include City/State/Zip):
PROJECT LOCATION: Section 28, Township 51 N, Range 7 W		Legal Description: (Use Tax Statement)	Recorded Document: (i.e. Property Ownership) Volume: Page(s):
PIN: (23 digits) 04-046, 25-1104, 28-402, 0000, 0000		Gov't Lot	Lot(s)
CSDM		Vol & Page	Lot(s) No.
Town of: Ru Sells		Block(s) No.	Subdivision:
Lot Size: 320' x 1320'		Acreage: 70	

<input checked="" type="checkbox"/> Shoreland →	<input checked="" type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or landward side of Floodplain? If yes--continue →	Distance Structure is from Shoreline: 100' feet	Is Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes--continue →	Distance Structure is from Shoreline: feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$15,000 - materials	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/>	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Privy (pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/> Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>

Existing Structure: (if permit being applied for is relevant to it)	Length: 30	Width: 30	Height: 10
Proposed Construction:			

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	(30 x 30)	900
	<input checked="" type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	(30 x 30)	900
	<input type="checkbox"/> with Loft	()	
	<input type="checkbox"/> with a Porch	()	
	<input type="checkbox"/> with (2 nd) Porch	()	
	<input type="checkbox"/> with a Deck	()	
	<input type="checkbox"/> with (2 nd) Deck	()	
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> with Attached Garage	()	
	<input type="checkbox"/> Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	()	
	<input type="checkbox"/> Mobile Home (manufactured date)	()	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify)	()	
	<input type="checkbox"/> Accessory Building (specify)	()	
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	()	
Rec'd for Issuance	<input type="checkbox"/> Special Use: (explain)	()	
AUG 22 2014	<input type="checkbox"/> Conditional Use: (explain)	()	
Secretarial Staff	<input type="checkbox"/> Other: (explain)	()	

FAILURE TO OBTAIN A PERMIT AT STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Dan & Laura Stoicova
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: _____ Date: 8-10-14

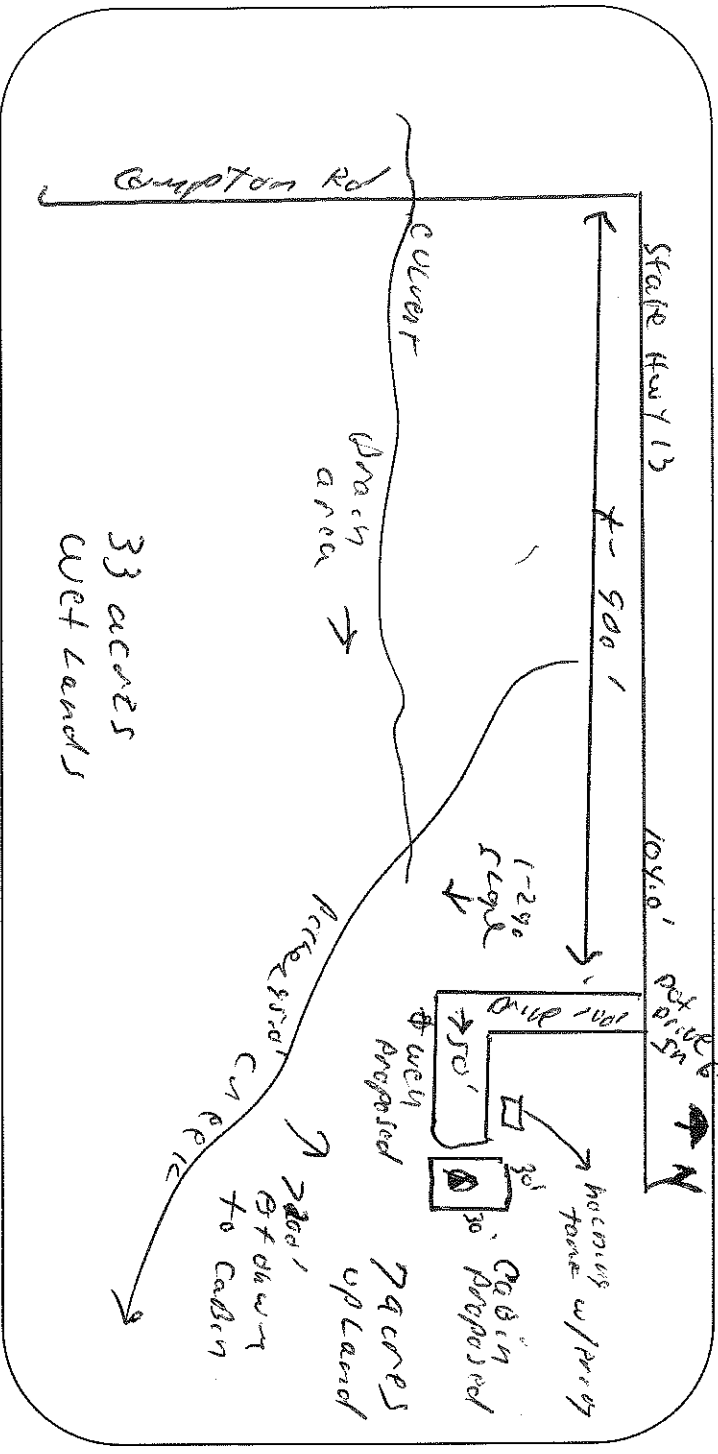
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
Address to send permit WITH Rock Creek Spencer WI 54479

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
(2) Show / Indicate: North (N) on Plot Plan
(3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
(4) Show: All Existing Structures on your Property
(5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(7) Show any (*): (*) Wetlands; or (*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	150' Feet	Setback from the Lake (ordinary high-water mark)	150' Feet
Setback from the Established Right-of-Way	100' Feet	Setback from the River, Stream, Creek	200' Feet
Setback from the North Lot Line	80' Feet	Setback from the Bank or Bluff	— Feet
Setback from the South Lot Line	1-1000' Feet	Setback from Wetland	300' Feet
Setback from the West Lot Line	1-500' Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	1-300' Feet	Elevation of Floodplain	50.0' Feet
Setback to Septic Tank or Holding Tank	50' Feet	Setback to Well	50' Feet
Setback to Drain Field	24' Feet		
Setback to Privy (Portable, Composting)	24' Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: 14-445	# of bedrooms: 4	Sanitary Date: 7-11-14
Permit Denied (Date):	Reason for Denial:			
Permit #: 14-0887	Permit Date: 8-22-14			
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous lot(s))	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	Case #:	Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Inspection Record: WDNOR - STEVE LAWRENCE - APPROVED CABIN SITE - PREVIOUS PROPERTY OWNER HAS INTEREST IN THE CREER'S ROUTE MAKING THE UPDRAFT		Zoning District (F-1) Lakes Classification (3 (Stream))		
Date of Inspection: 7-10-14		Inspected by: J. CAMPBELL, MURPHY		
Condition(s): TOWN, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)				
NECESSARY PERMIT + INSPECTION shall be obtained by WATER WDC-INSPECTOR.				
Signature of Inspector: [Signature]		Date of Approval: 7-11-14		
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input checked="" type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	